STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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PLEASE PRINT

| | | | NEW HAMPSHIRE |
|--|--|--|--|
| I. Name of Lobbyist(| s) EDDIE 6 | - DWARDS | DEPARTMENT OF STATE |
| II. Name of lobbyist's | s partnership, firm or corporation, if | any: | |
| | EDDZE EDWART | S CONSULTING | |
| (Nac | EDDIE EDWARD ne of partnership, firm or corporation) | | |
| 7 | reet) (Town/City) | DOJER NH | 03021 |
| Business Address: (St | rect) (Town/City) | (State) | (Zip Code) |
| (Telephone) | 7 6 \$ 5 () | e-mail e-dans | adi Cousul II NG Coma=4 Co |
| reportable expense t | overs: (Choose one – file separate rep ransactions which are not attributable | e to any one client). | |
| All reportable tran | sactions occurring in the months prior t | | |
| | (Full Name of Client as it appears on the | 1 ALLIANCE | A CONTRACTOR OF THE CONTRACTOR |
| | (Full Name of Client as it appears on the | Lobbyist Registration Form) | |
| OR All reportable tran unrelated to any partic | sactions by the lobbyist (including the le cular client. | | g firm listed below which are |
| IV. Date of Report Reports cover: acti | April 26, 2017 vity from date of registration to 3/31/17 | July 26, 2017 3 activity from 4/1/17 to 6/30/17 | 7 |
| | October 25, 2017 activity from 7/1/17 to 9/30/17 | January 31, 2018 activity from 10/1/17 to 12/3 | 1/17 |
| V. There have bee If this box is checked, Concord, NH 03301. | n no fees received and no reportat , complete fust this form and submit it to | ole transactions made since to the Secretary of State's Office. | the last report. [] State House, Room 204, |
| VI. Check if additio | nal reports are attached: | | |
| If you have recei | ved fees or made expenditures, you mus | st file Addendum A- Fees and E | expenses |
| If you have paid Expense Reimbursen | an honorarium or reimbursed expenses, | you must file Addendum B- Re | eport of Honoranums of |
| if you, your firm | i, or your family has made political cont | ributions, you must file Addend | um C- Political Contributions |
| I have read RSA 15, and complete to the l | | d hereby swear or affirm that the $\frac{\sqrt{7/24/6}}{\sqrt{0}}$ | foregoing information is true |
| (Print Name of lobb | ETUANDS | | |

PLEASE PRIN

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

| I. Name of Lobbyist(s) EDDIE EDWANDS | |
|--|---|
| II. Name of lobbyist's partnership, firm or corporation, if any: | |
| (Name of partnership, firm or corporation) | ×6 |
| (Name of partnership, firm or corporation) | 22/2/12 |
| III. Name of Client CRAFT TSTELL ALLFANCE | Date 0//26/1/ |
| IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greened by any expenses: | relations, or public relations service |
| a) Total of all fees received in this reporting period | a)\$ 7,500.00 |
| b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year). | b) S 5, 000, co |
| c) Total of all fees received to date (Add lines a and b) | c)s 12,580 00 |
| d) Indicate the amount of any such fees that are due, but have not yet been paid | d) \$ 2 500 36 |
| V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expenditure was of \$25.00 or less (for examplunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this reparant purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported. | may be filed for the lobbyist(s)/fire aggregate total of all expenses paragregate total of all expenses paragregate total of the impact of the impact of the aggregate total of the impact of the purchased during a business than \$10 that is given to the persect with a value of \$25.00 or less); a porting period of greater than \$25.00 use of greater than \$25, but not greater than \$25, but not greater than \$25, expense reimbursement, or politic |
| a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. | a)\$ 7,506.43 |
| b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less. | ы s |
| c) Total of all itemized expenditures reported in detail in section VI. | c)s 335.65 |

| D. T L | d) \$ 7, 835, 65 |
|--|------------------------------------|
| d) Total expenses for this reporting period (Add lines a, b and c) | |
| e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) | e) \$ |
| f) Total of all expenses year to date | ns 12, 875.C.5 |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from le period, including by whom paid or to whom charged. | obbying fees during this reporting |
| Paid to: | Amount: |
| POLIDAY INN- FUNCTION BOOM RENTAL CONFT STEW ALLIANCE PRESENTATED | s 375.65 |
| CONFT STEW ALLIANCE PROJENTATED | \$ |
| MARY RAIT (CBA) | \$ |
| | \$ |
| | \$ |
| | \$ |
| | |
| | |
| | |
| Sworn Statement/Affirmation by Lobbyist | |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir | m that the foregoing information |
| is true and complete to the best of my knowledge and belief. | / / |
| | 67/26/17 |
| (Signature of lobbyist) | (Date) |
| ECHANICED VICKER | |
| (Print Name of lobbyist) | |